

(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
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COVER LETTER

TO: Registration Section Division of Corporations	!		
SUBJECT: 104th Street LLC			
Name of Limited	Liability Company	_	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and	d fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the	e following:		
Elizabeth Hamilton		202	
Name of Person		2022 NUG	,
10.1.0	· - 	JG 29	(467) (3
104th Street LLC		9	4
Firm/Company		. =	ر د ا
4407 Melrose Ave		мн ю н н	
Address	·	-	
Jacksonville FL 32210	<u>.</u>		
City/State and Zip Code			
eahamilton217@gmail.com	•		
E-mail address: (to be used for future annual report not	ification)		
For further information concerning this matter, please call:	,		
Elizabeth Hamilton 904	327-9657		
Name of Person	Area Code & Daytime Telephone Number	- er	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amount:			
□ \$25 Filing Fec □ \$	\$55 Filing Fee & Centified Copy		

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

(a)	4407 Melrose Ave	(b)	(b) 4407 Melrose Ave					
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)				-	
	Jacksonville, FL 32210		Jacksonville, I	FL 32210				
	7/13/2022	1.	22000311975		.			
	Date of filing/registration in Florida	4.	Do	ocument number				
(a)	Northwest Registered Agent LLC							
(4)	Registered Agent and Registered Office shown on the records Northwest Registered Agent LLC	Dept. of State:						
	Registered Office Address (MUST BE FLORIDA STREAT 7901 4th St N. Ste300	ET ADDRESS)			- :.	2022 AUG	ارسي ^ا د	
	St Petersburg	FL_33702			<u>:</u>	629	· · · · · · · · · · · · · · · · · · ·	
(b)	Elizabeth Hamilton					AM 10: 44		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addr	<u>'ess</u> :			ئ ن		
	Elizabeth Hamilton					ŧ-		
	NEW Registered Office Address:							
	4407 Melrose Ave		·					
	Jacksonville	32210						

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Elizabeth A Hamilton

Printed or typed name of signee

Signature of Rogistered Agent